# 00327746

(Re	questor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nai	me)
(30		
(Do	ocument Number)	)
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tified Copies	Certificate	s of Status
pecial Instructions to	Eiling Officer	<del></del>
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Office Use Only

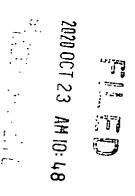


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### **COVER LETTER**

SUBJECT: DISTRICT AND DOWN I-LC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ASIA PAVARIATIVITATION Name of Person
Firm/Company
2131 N Mcridian Rd apt 8213
Talkhassee F1 30303 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ASIATYI-CY at (650) 241-5396 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certificate of Status □\$160.00 Filing Fee, Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)

# Mailing Address

TO:

New Filing Section Division of Corporations

> New Filing Section
> Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE 1 - Name: ne name of the Limited Liability Company is:		
Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")	<del></del>	
RTICLE II - Address: ne mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
2131 Noverchan Rd ADF 2131 Noverchan ADF 2131 Nover	resse	
RTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: he Limited Liability Company cannot serve as its own Registered Agent. You must designate an indivicother business entity with an active Florida registration.)	inal or	
ne name and the Florida street address of the registered agent are:	2020	
ASIA TVICY	2020 OCT 23	17272 (17272 (17272
2131 NMC101CN P.Cl-Apt-3 Florida street address (P.O. Box NOT acceptable)	3 AM 10: 48	
Talkingsee f 1 32303 City State Zip	α. 	· •
ving been named as registered agent and to accept service of process for the above stated limited liability of the designated in this certificate, I hereby accept the appointment as registered agent and agree to act in th	company at the is capacity. I	

ther agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I familiar with and accept the obligations of my position as negistered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	ASIA TYLER 2131 NAVIOLICA ROLADI-213 FAIRMASSEEF+ 32303	
(Use attachment if necessary)		
(If an effective date is listed, the date must be s the date of filing.)	te of filing:	
ARTICLE VI: Other provisions, if any,		
REQUIRED SIGNATURE:		
I am aware that any fal	nember or an authorized representative of a member. Ented in accordance with section 605.0203 (1) (b). Florida Statutes. Is information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.	
ASIA	Typed or printed name of signee	
	Filing Fees:	

The name and address of each person authorized to manage and control the Limited Liability Company:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)